

Rec'd PCT/PTO 11 MAY 2005
10/534462
PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of

Daniel CHATROUX et al.

Application No.: New U.S. National Stage of PCT/FR2003/003449

Filed: May 11, 2005

Docket No.: 123886

For: INTEGRATED CIRCUIT COMPRISING SERIES-CONNECTED SUBASSEMBLIES

**TRANSMITTAL OF POWER OF ATTORNEY AND
STATEMENT UNDER 37 CFR § 3.73(b)**

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Submitted herewith is a Power of Attorney from the Assignee.

In compliance with 37 CFR §3.73(b), the undersigned hereby states that

COMMISSARIAT A L'ENERGIE ATOMIQUE is the assignee of the entire right, title and interest in the patent application identified above by virtue of an assignment from the inventors of the patent application identified above. A copy of the assignment is attached hereto.

The undersigned is authorized to act on behalf of the assignee.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944, TELEPHONE (703) 836-6400.

Respectfully submitted,



Thomas J. Pardini
Registration No. 30,411

TJP/dmr

Date: May 11, 2005

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

GENERAL POWER OF ATTORNEY

Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

Owner Name: COMMISSARIAT A
L'ENERGIE ATOMIQUE

hereby appoints the patent practitioners associated with Oliff & Berridge, PLC Customer
No. 25944 as attorneys of record to prosecute any and all applications in which this General
 Power of Attorney is filed, and all continuations and divisions thereof, owned in whole or in
 part by the above-named owner, and to transact all business in the Patent and Trademark
 Office.

The undersigned is authorized to execute this document as or on behalf of the owner.

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD
BE SENT TO OLIFF & BERRIDGE, PLC, CUSTOMER NO. 25944, TELEPHONE
(703) 836-6400.

September 16, 2004

Date



Signature

Typed
Name:

R. NAGEL
Chef de Service

Title:

(if acting on behalf of an Owner)

COMMISSARIAT A L'ENERGIE ATOMIQUE

APPLICATION FOR UNITED STATES PATENT
DECLARATION

10/534462

As a belownamed inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; that

I verily believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: Integrated circuit comprising series-connected subassemblies

described and claimed in the specification:

Check one

a. attached hereto.
 b. filed on _____ as Application No. _____ and amended on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose to the Office all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

Under Title 35, U.S. Code §119, the priority benefits of the following foreign application(s) and/or United States provisional application(s) filed by me or my legal representatives or assigns within one year prior to this application are hereby claimed:

French patent Application No. 02 14763 ✓
 Filed on November 25, 2002 ✓

The following application(s) for patent or inventor's certificate on this invention were filed in countries foreign to the United States of America either (a) more than one year prior to this application, or (b) before the filing date of the above-named foreign priority application(s) and/or United States provisional application(s):

NONE

ALL CORRESPONDENCE IN CONNECTION WITH THIS APPLICATION SHOULD BE SENT TO OLIFF & BERRIDGE, PLC,
CUSTOMER NUMBER 25944, TELEPHONE (703) 836-6400.

I hereby declare that I have reviewed and understand the contents of this Declaration, and that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	Typewritten Full Name of First or Sole Inventor:	<u>Daniel</u>		Given Name	Middle Initial	Family Name
2	**Inventor's Signature:					
3	**Date of Signature:	<u>May</u>		03	2005	
Residence:	<u>Montélimar</u>	Month		Day	Year	Country
Citizenship:	<u>FRENCH</u>	City		State or Province		France
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*If Box (a.) is checked, this form may be executed only when attached to the specification (including claims).

**Note to Inventor: Please sign name exactly as it appears above and insert actual date of signing.

IF THERE IS MORE THAN ONE INVENTOR USE PAGE 2 AND PLACE AN "X" HERE

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PAGE2 OF U.S.A. DECLARATION FORM
(Discard this page in a sole inventor application)

10/534462

1 *Typewritten Full Name
of Second Joint Inventor (if any):* 200 Marc .BELLEVILLE
Given Name Middle Initial Family Name

2 ***Inventor's Signature:* BELLEVILLE

3 ***Date of Signature:* May 03 2005

Residence: Saint Egrève FRX France

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12 rue de Chantemerle
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1 *Typewritten Full Name
of Third Joint Inventor (if any):*

Given Name Middle Initial Family Name

2 ***Inventor's Signature:*

3 ***Date of Signature:*

Month Day Year

Residence: City State or Province Country

Citizenship: French City State or Province Country

Post Office Address:
(Insert complete
mailing address,
including country)

1 *Typewritten Full Name
of Fourth Joint Inventor (if any):*

Given Name Middle Initial Family Name

2 ***Inventor's Signature:*

3 ***Date of Signature:*

Month Day Year

Residence: City State or Province Country

Citizenship: French City State or Province Country

Post Office Address:
(Insert complete
mailing address,
including country)

1 *Typewritten Full Name
of Fifth Joint Inventor (if any):*

Given Name Middle Initial Family Name

2 ***Inventor's Signature:*

3 ***Date of Signature:*

Month Day Year

Residence: City State or Province Country

Citizenship: French City State or Province Country

Post Office Address:
(Insert complete
mailing address,
including country)

Note to Inventors: Please sign name exactly as it appears and insert the actual date of signing.

This form may be executed only when attached to the first page of the Declaration form of the application to which it pertains.